



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 62998		2. Exact name of the Corporation Electrolizing, Inc.		
3. Principal office address 20 HOUGHTON STREET		City PROVIDENCE	State RI	Zip 02904
4. Business Phone No. 401-861-5900		5. State of Incorporation ILLINOIS		
6. Brief description of the character of business conducted in Rhode Island				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name CHRISTOPHER BEJBL		Vice-President Name MICHAEL BEJBL		
Street Address 1069 FRENCHTOWN ROAD		Street Address 200 N. RIVER LANE, UNIT 405		
City E. GREENWICH	State RI	Zip 02818	City GENEVA	State IL
Secretary Name MICHAEL BEJBL		Treasurer Name MICHAEL BEJBL		
Street Address 200 N. RIVER LANE, UNIT 405		Street Address 200 N. RIVER LANE, UNIT 405		
City GENEVA	State IL	Zip 60134	City GENEVA	State IL
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name CHRISTOPHER BEJBL		Director Name MICHAEL BEJBL		
Street Address 1069 FRENCHTOWN ROAD		Street Address 200 N. RIVER LANE, UNIT 405		
City E. GREENWICH	State RI	Zip 02818	City GENEVA	State IL
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		1,000	COMMON	NO PAR

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FILED
 JUL 01 2013
 3081

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Michael Bejbl
 Signature of Authorized Representative
 Date **6/35/13**

MICHAEL BEJBL
 Print or Type Name of Authorized Representative